## P94000039566

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	D0600003056	····			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	Patsy Ward				
•		Name of Contact Person	n		
	Gone Again, Inc.				
		Firm/ Company			
	1897 SE Effland Ave.				
•		Address			
	Port St. Lucie	, Fl. 34953			
		City/ State and Zip Cod	e		
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:					
Patsy Wa	rd	at ( <b>772</b>	, 834-8111		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address		<u>St</u> reet	Address		
Amendment Section		Amendment Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314			Building  Yeautive Center Circle		
ranz	Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301				

## Articles of Amendment to Articles of Incorporation of

Gone Again, Inc.				
(Name of Corporation as current)	ly filed with the Flori	da Dept. of State)		•
P96000039566				
(Document Number	r of Corporation (if kn	own)		•
Pursuant to the provisions of section 607,1006, Floits Articles of Incorporation:	orida Statutes, this <i>Flo</i>	rida Profit Corporation a	dopts the following	g amendment(s) t
A. If amending name, enter the new name of the	e corporation:			
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	orp," "Inc," or "Co"	' A professional corpor	orated" or the al ation name must o	The new observation contain the
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A				63
	-			3 PH 3: 27
C. Enter new mailing address, if applicable:	-			27
(Mailing address <u>MAY BE A POST OFFICE</u>	<u>BOX</u> )			
	<u>-</u>	,		
D. If amending the registered agent and/or reginew registered agent and/or the new registered		in Florida, enter the na	me of the	
Name of New Registered Agent			-	
	(Florida street d	address)	_	
New Registered Office Address:	(City)	, Florida	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent		and accept the obligation	ns of the position.	
Signature o	f New Registered Ages	nt if changing	_	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	Р	Patricia A. Ward	same
Add			
Remove			
2) Change	<u>V</u>	Gary W. Ward	same
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			17700
Add			<u></u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued sharprovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
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provisions for implementing the amendment if not contained in the amendment itself:	
	res,

The date of each amendment(s) adoption: 12/19/2014	, if other than the
date this document was signed.	<b></b> ,
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 12/19/2014	
Signature Potticea A. Wad	•
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
Patricia A. Ward	
(Typed or printed name of person signing)	
President	
(Title of person signing)	<del></del>